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ABSTRACT

This Kids Count report is the eighth to examine annually statewide trends in the well-being of Washington's children. Following an introduction, Part 1 of the report focuses on one "success story" and one "challenge ahead" for each of the five domains examined: (1) family and community (including teen birth rate, teen pregnancy, births to unmarried mothers, divorces involving children, children in out-of-home care); (2) economic conditions (including wages, per capita income, and child care costs); (3) health (including infant mortality rate, low birthweight rate, immunizations, deaths from medical conditions, and suicide mortality); (4) education (including percentage of fourth and seventh graders meeting adequate standards on statewide tests of reading, math, writing, and listening); and (5) safety and security (including child abuse and neglect, homicides, and juvenile arrests). Successes highlighted in the report include the recent decline in teen pregnancy, improvements in wages and employment, decline in infant mortality, establishment of universal K-12 public education, and the reduction in deaths from unintentional injuries. Challenges highlighted include rekindling community concern and caring for children, reducing income disparities, helping children learn and adhere to health behaviors, ensuring that all children have the educational tools to succeed, and curbing the epidemic of violence. Part 2 of the report presents statewide trends and county information on key indicators. The report concludes with information on data sources. Appended are tables detailing the number of children in each Washington county in 1980 and 1998 as well as a statewide breakdown by age, sex, and race. (KB)

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The State of Washington's Children

SPRING 2000

REPORT

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THE STATE
of
WASHINGTON'S CHILDREN

SPRING 2000

This is the eighth annual report on
The State of Washington's Children. It was produced by the
University of Washington School of Public Health and Community Medicine
in collaboration with the UW Human Services Policy Center.
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University of Washington
School of Public Health and Community Medicine

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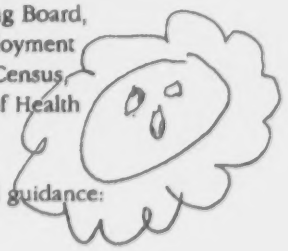

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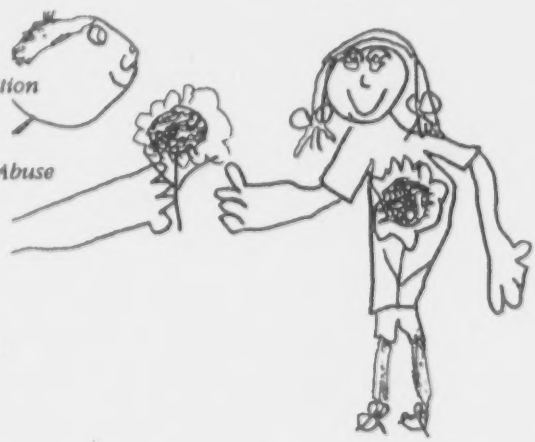

The State *of* Washington's Children

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WASHINGTON'S CHILDREN

PAST AND FUTURE

The entry to a new decade, a new century, the "new millenium," is an appropriate time to look back and look forward to the most notable successes and the most pressing challenges for Washington's children at this significant turning point.

In this report the editors have chosen to highlight one "Success Story" and "Challenge Ahead" for each of the five domains we traditionally cover. We have had to make some rather tough — and arbitrary — choices to select just one success and one challenge in each area. We point out some actions that would help meet these challenges. Here they are:

The Success Stories

Family and Community: the recent decline in teen pregnancy

Economic Conditions: improvements in wages and employment

Health: the decline in infant mortality

Education: the establishment of universal K-12 public education

Safety and Security: the reduction in deaths from unintentional injuries

The Challenges Ahead

Family and Community: rekindling community concern and caring for children

Economic Conditions: reducing income disparities

Health: helping children learn and practice healthy behaviors

Education: ensuring that *all* children have the tools to succeed

Safety and Security: curbing the epidemic of violence

◇ *Success Story:* The Recent Decline in the Rates of Teen Pregnancy

After disturbing increases in the rates of teenage pregnancy and childbearing during the 1970s and 80s we are beginning to see a decline. This change in trend demonstrates that public health professionals, schools, community leaders, and medical providers can, by working together, influence even complex and "private" health-related behaviors. The gains in preventing teen pregnancy have been hard fought and have required much experimentation to see what works. Clearly, there is no "magic bullet." But, as our recent successes demonstrate, cooperative efforts among all sectors of the community *can* make a difference.

Much more work is needed to continue this downward trend. It has been well documented that women delivering during their teen years, and their children, are at greatly increased risk for welfare dependency, shortened schooling, and a multitude of other social disadvantages. Washington State's teen pregnancy rate is still 4 to 5 times higher than the highest rates in European countries. Preventing unplanned, unwanted, and mistimed childbearing must continue to be a top public health priority.

➢ *The Challenge Ahead:* Rekindling Community Concern and Caring for Children

In this and in previous issues of the *State of Washington's Children*, we have documented the high degree of alienation that adolescents experience within their communities. In their teen years, they feel progressively less supported by adults in their neighborhoods, by teachers, and by their families. Equally distressing, they also report a remarkably high degree of contact with adults involved in criminal, drug-related, and violent behaviors. The continued increase in the number of children born to single parents and the high ratio of divorces to marriages in this state also point to a growing need for better support of children by neighbors, schools, and adults generally. Without good role models, without adequate encouragement for good behaviors, without the active and positive influence of adults, children will look to their peers, the media, and inappropriate adults for role models and support.

In the next century, we will need to develop — or rediscover — ways to bridge the generation gap. Adults — all adults — should feel more responsible and respectful toward the young people in their communities. And young people should feel more positive about growing into adulthood.

◇ *Success Story:* Improvements in Wages and Employment

Washington's families are living at a high level of material prosperity, by any historical standard. Our economy has become diverse, with a wide range of strengths beyond the natural resources that formed the original basis of wealth in Washington. Aerospace, software, electronics, transportation, health, and education sectors employ hundreds of thousands of workers. In recent years, Washington has been one of the fastest growing states, with one of the lowest employment rates in the nation. In the last decade, average per capita income has grown by almost 25% above the rate of inflation, from $22,600 in 1988 to $28,060 per person in 1998. Average wages per worker have shown a similar increase, from $28,630 in 1988 to $33,071 in 1998. Nearly 100% of families in the top 40% of the income distribution own their own homes, as do more than two-thirds of families in the middle fifth. We have mechanisms to help families weather the impact of economic cycles, from unemployment insurance to retraining programs. The opportunities for entrepreneurial success are tremendous, with more than 255,000 separate businesses operating in Washington.

No child should lack the necessities of life because parents' wages and benefits are insufficient.

➢ *The Challenge Ahead:* Reducing Income Disparities

Our goal is to ensure that every child in Washington grows up in a family that can meet its basic economic needs. Strong as our economic growth has been, three areas of weakness call out for improvement in this new century.

- ☐ Income is poorly distributed, with the richest 20% owning nearly half the total income, and the bottom half holding less than 5%. Moreover, this gap has increased in the last decade, with the top 20% gaining an ever larger share, and the remaining 80% falling farther behind.
- ☐ Child poverty rates remain unconscionably high. One in 7 children in the state continues to live in deep poverty, the same as in 1990. One in 5 lives in mild poverty. Overall, 1 in 3 Washington children lives in a family that lacks sufficient income to meet the basic needs of food, housing, health and child care, transportation, and insurance.
- ☐ Growth in wages shows geographic maldistribution. For example, in the last year, wages grew 6% above inflation in King County but only 2 to 3% in the other urban areas of the state; in the rural areas, wages grew less than 2%. The high unemployment areas, hit by declines in timber, mining, and fishing industries, and periodic agricultural downturns, have the lowest rates of social achievement — lower school test scores and higher rates of teen substance abuse, pregnancy, and crime.

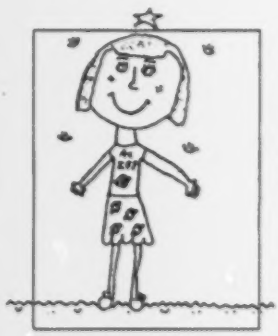
Remedies are available if we have the will to pursue them. Employers should pay living wages and provide basic health and pension benefits to workers. Public and private groups should contribute to better job training and preparation so that all workers can contribute productively to the economy. And public and private programs should provide assistance to help struggling working families meet their basic needs — assistance with housing, health and child care, and transportation. No child should lack the necessities of life because parents' wages are insufficient.

◇ *Success Story:* The Decline in Infant Mortality

One of the twentieth century's greatest — and best documented — successes for children has been the dramatic decline in infant mortality. Deaths in the first year of life, which in 1900 occurred at a rate of approximately 100 per 1,000 live births, are now rare, less than 6 per 1,000. Gains early in the century followed improvements in living conditions, nutrition, and hygiene. During the 1960s and 70s, advances in neonatal technology, obstetric care, and especially the development of coordinated, regionalized, high-risk neonatal intensive care units, continued the downward trend in infant mortality. More recent declines are not related to advances in technology, but to public education campaigns about sleep position and its relation to sudden infant death syndrome (SIDS). Over the last 10 years, the infant mortality rate has declined from 9.2 per 1000 births to 5.7, largely due to a plummeting in deaths from SIDS. This remarkable decline demonstrates the combined effectiveness of technology, medicine, social policies, medical care coordination, and public health education.

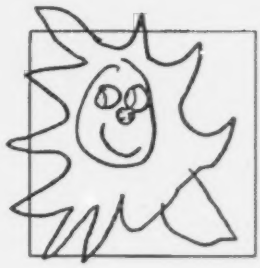
Despite these improvements, it is important to remember that disparities in infant mortality continue: minorities have a risk of infant death that is still twice that of whites. These disparities are neither inevitable nor acceptable. Our challenge in the new century is to eliminate them.

➢ *The Challenge Ahead:* Helping Children Learn and Practice Healthy Behaviors



Despite remarkable advances in medical science, technology, and treatment, it is clear from data presented in this and previous issues of this report that children in our state do not take very good care of their health. The scientific literature is clear on the benefits of good diet and nutrition, appropriate body weight, exercise, sleep, and the importance of avoiding cigarettes and drugs. Nevertheless, too many children are obese. Children get progressively less and less exercise as they move through their adolescence. They do not get enough sleep. Their use of tobacco, alcohol, and drugs has either increased or stayed constant over the last decade.

The effect of these bad health habits can be both immediate and long term. The risk to health due to failure to use seat belts or bicycle helmets, from drinking while driving, and from drug use, can be acute and fatal. The chronic effects of inadequate sleep, obesity, poor nutrition, and lack of exercise are health problems in adulthood, as is premature death from a variety of common chronic and preventable medical conditions. We have not "taught our children well" — or perhaps we have taught them too well: children emulate the behaviors of their parents and other adults. In the new century, greater thought, effort, emphasis, and resources need to be applied to improving personal health behaviors. We cannot rely on medical care to compensate for poor maintenance of physical and mental health.



RECENT TRENDS	WHAT'S BETTER?	RECENT TRENDS
Family and Community Indicators		
Teen Birth Rate (per 1,000 15 to 17-year olds)	25.3 **(1997)**	24.2 **(1998)**
Teen Pregnancy Rate (per 1,000 15 to 17-year olds)	45.5 **(1997)**	42.5 **(1998)**
Economic Well-being Indicators		
Average Wages (in 1998 dollars)	$28,630 **(1988)**	$33,071 **(1998)**
Per Capita Income (in 1998 dollars)	$22,600 **(1988)**	$28,060 **(1998)**
Number of Poor Children (percentage in poverty)	150,527* (14.3) **(1995)**	146,946** (13.1) **(1998)**
Percentage of Children Without Health Insurance (age 18 or younger)	10 **(1995)**	7 **(1998)**
Health Indicators		
Suicide Mortality (deaths per 100,000 10 to 19-year olds)	6.1 **(1997)**	5.7 **(1998)**
Education Indicators		
Percentage Meeting Adequate Standards		
4th Grade Reading	61	67
4th Grade Math	34	42
4th Grade Listening	75 **(1998)**	77 **(1999)**
Safety and Security Indicators		
Mortality from Unintentional Injuries		
(deaths per 100,000 0 to 14-year olds)	9.9	7.2
(deaths per 100,000 15 to 19-year olds)	34.7 **(1997)**	31.1 **(1998)**
Homicide Mortality (deaths per 100,000 15 to 19-year olds)	8.8 **(1997)**	8.2 **(1998)**
Mortality Due to Firearms (deaths per 100,000 15 to 19-year olds)	17.0 **(1997)**	12.7 **(1998)**
Percentage of Mortality Due to Firearms (percentage of deaths of 15 to 19-year olds)	24.9 **(1997)**	20.4 **(1998)**

*Washington Kinds Count **State Population Survey

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Family and Community Indicators

Number of Divorces Involving Children	15,032 (1997)	15,518 (1998)
Births to Unmarried Mothers	27.2% (1997)	28.0% (1998)
Children Living in Out-of-Home Care (total number, unduplicated)	16,397 (FY 1998)	16,361* (FY 1999)

Health Indicators

Low Birthweight Rate (percent of births)	5.6 (1997)	5.7* (1998)
Percentage of 2-year olds Fully Immunized	80 (1997)	81* (1998)
Mortality from Medical Conditions		
(deaths per 100,000 1 to 9-year olds)	12.2	11.5*
(deaths per 100,000 10 to 19-year olds)	9.8	11.0
	(1997)	(1998)

Education Indicators

Percentage Meeting Adequate Standards 4th Grade Writing	41 (1998)	37 (1999)

Safety and Security Indicators

Child Abuse Accepted Referrals (per 1,000 children <17 years)	30 (1998)	28* (1999)
Juvenile Arrest Rates for Violent Crime (per 100 10 to 17-year olds)	3.2 (1996)	3.3* (1997)
Juveniles Held in Detention (per 100 10 to 17-year olds)	43.6 (1996)	44.7 (1997)

* No appreciable change

Universal, publicly financed education for children aged 6 to 18 began in the late nineteenth century and flourished through the twentieth. Development of a professional teaching profession, with standards, reasonable professional salaries, and state-supported colleges of education has been a major contributor to American democracy and economic growth.

◇ *Success Story:* The Establishment of Universal K-12 Public Education

Through the twentieth century, state, local, and federal entities invested billions of dollars — 7.4% of GDP — in elementary, secondary, and post-secondary education. We made special investments in reaching students disadvantaged by poverty or minority status, students with special physical or emotional needs, and those whose primary home language is not English. We created a broad federal system of grants and loans to facilitate access to colleges and universities by low and middle income students. The system of "common schools" met the needs of our agricultural and industrial economy and society through the first three quarters of the century. For some students who have access to the best parts of the educational sytem, learning opportunities are unlimited. At the end of the century, Washington policy makers realized that greater changes were required to meet emerging social and economic needs, and that we must shift our attention from how much money we are putting into the system, to achieving learning outcomes — from all children attending, to all children performing.

➢ *The Challenge Ahead:* Ensuring that all Children Have the Tools to Succeed

Our goal now is to make good on our promises and provide environments that allow all children to learn and perform up to standards.

- ☐ That means extending our efforts before age 6 and past age 18;
- ☐ It means closing the gap for disadvantaged and minority students;
- ☐ It means responding to the individual needs and learning styles of all students so that they are engaged in the learning process, not progressively turned off by schools that are rigid but not challenging.

A century ago, it was thought that before age 6, children were basically "plumbing" to be kept safe and clean until they were "ready to learn." We now understand that learning begins at least as early as birth, but our educational policies have not matched that understanding. We pay child care workers $7.50 an hour — one-quarter what we pay K-12 teachers — so we cannot attract or retain quality personnel. We have no infrastructure of state-supported training to provide a professional cadre of early childhood teachers. And we have no broad financing system making quality early leaning available to all children. Rather, we have a "reverse head start," with affluent families spending up to $10,000 a year to buy each of their children 5 years of early learning.

Our state's educational leaders have set learning standards that should be achieved by 80% of our students; yet only about half are meeting reading standards and only a third are meeting math standards. Fewer than 1 in 10 African American, Hispanic, and Native American children are meeting standards in math. Minority students place an even higher value on education than do white students, but report that schools are not meeting their needs. All groups of students report being progressively turned off; the longer they stay in school, the less meaningful they find it. We know what promotes effective learning; we must invest the human and financial resources to make good on our promise of an excellent education for all Washington's children.

◇ *Success Story:* The Reduction of Unintentional Injuries

As recently as 20 years ago, unintentional injuries — "accidents" — were viewed as random, unpreventable events — "acts of God." In Washington these random events were responsible for more childhood deaths than were any other causes. Fortunately, in the early 1980s a few far-sighted medical and public health professionals began to question conventional wisdom and look for means to prevent injuries. As a result of these efforts, which span the medical, behavioral, engineering, and regulatory spheres, we have seen a steady decline in the mortality from injuries in this state. Twenty years ago, for example, injuries in motor vehicle accidents were responsible for 53% of teen deaths compared to 35% in 1998. Due to the pioneering efforts of Washington pediatricians, bicycle helmets are now almost universally used. Not surprisingly, bicycle-related injuries have also declined.

Maintaining these improvements will require not only advances in the medical care of injured patients, but efforts at prevention, such as the use of seat belts, bicycle helmets, and safety locks on firearms. Reducing dangerous behaviors, such as driving while under the influence of alcohol or drugs, will undoubtedly result in further declines in motor vehicle deaths and accidents.

⋗ *The Challenge Ahead:* Violence

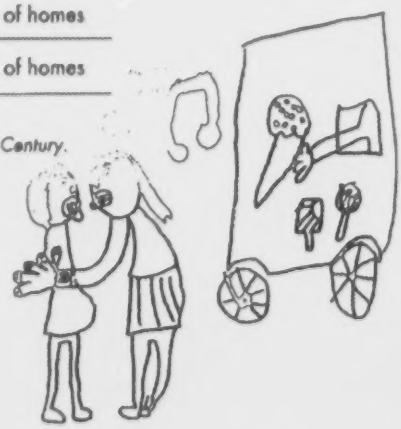
Data in this and previous reports provide strong evidence for the high rates of homicide, violence, and gun use among teenagers. Too many of our students feel that violence is a justifiable way to solve problems and settle differences. According to the Washington State adolescent survey, two-thirds of tenth grade boys feel it is okay to beat up someone. And more than a third think it is not wrong to pick a fight. Acceptance of violence is not confined to boys. One-third of eighth grade girls reported in the same survey that it is not wrong to pick a fight and 40% said it was okay to hurt someone if provoked. Seven percent of high school seniors say they have carried a hand gun to school and 37% say they would find it easy to obtain a gun.

Children are constantly exposed to violence in the movies, newspapers, and video game industry. Nevertheless, one of the most important influences on a child's behavior is the violence that he or she sees, particularly within the family. Too many children are exposed to violence at home — not infrequently directed at them. Homicide deaths in the United States are higher than in almost any other country in the world. Handgun deaths are even higher. The problem clearly extends beyond Washington State, but through our laws and our schools, and within our communities, we need to redouble our efforts to reduce violence, control children's access to guns, and provide modeling and training in conflict resolution. Without leadership and without the support of all caring adults, the epidemic of violence will continue to rage.

A Century of Progress: U.S. Families in 1990 and 2000

Key Indicators	In 1900	In 2000
Average life expectancy	47 years	77 years
Number of children	34 million	79 million
Children as a percentage of the population	44%	29%
Formal education	Typically ended at age 14	Required until age 16
School enrollment	78%	98%
High school completion	6%	86%
Education beyond high school	1.9% received a college degree	48.5% receive a bachelor's or associate's degree
Average household composition	4.8 members	2.6 members
Mothers in labor force	6% of married women	65% of women with children
Young people working	~15% between ages 10–15	45% between ages 16–19
	>50% of teens do volunteer work	
Percentage of young people working in agriculture	60%	4%
Infant deaths	96 per 1,000 live births	7 per 1,000 live births
Telephone ownership	5% of homes	94% of homes
Computer ownership	0%	68% of homes

From The Children's Partnership report, *America's Children in the 21st Century.*



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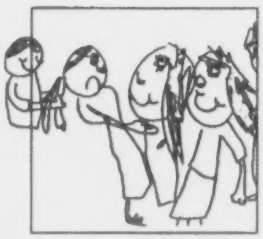
WASHINGTON'S CHILDREN

FAMILY AND COMMUNITY



As we enter the new century, it is clear that we are witnessing several important demographic trends that will strongly affect children and families. The population is aging: people are living longer. Combined with this is a decline in birth rates, which are approaching the century-low levels that occurred during the Great Depression. The result is that children are becoming a smaller segment of society. In 1970, for example, children 19 years of age and under were 38% of the state's population; by 2020 this share is expected to drop to 26%. Households with children are a distinct and shrinking minority: today, only 1 in 3 households in the state include children. While these trends could suggest an increasing number of adults per child, leading to greater support, protection, and nurturance, recent trends highlighted in this report do not support this hope.

Families in Washington Are Changing:

- More children are being born to single parents than ever before in our history. Furthermore, although divorce rates are declining in Washington State, so are the rates of marriage. Consequently, the ratio of divorce to marriage has increased in the past several decades. These trends mean that fewer adults are at home to raise families.

- The proportion of children born to racial and ethnic minorities is increasing. We can expect that more families will face difficult hurdles from the start, simply because of disadvantages in language, education, and income.

- The proportion of births to older women has increased significantly.

Key Indicators	Then	Now	Trend
Teen Birth Rate (per 1,000 15 to 17-year olds)	25.3 (1997)	24.2 (1998)	Better
Teen Pregnancy Rate (per 1,000 15 to 17-year olds)	45.5 (1997)	42.5 (1998)	Better
Births to Unmarried Mothers (percent of births)	27.2 (1997)	28.0 (1998)	Worse
Number of Divorces Involving Children	15,032 (1997)	15,518 (1998)	Worse
Children Cared for in Out-of-Home Care Services (total number, unduplicated)	16,397 (1998)	16,361 (1999)	No Change

These trends are magnifying the two-tier nature of childbearing. One group of mothers tends to be young, poor, and unmarried, while the second group is older and likely to be better off financially.

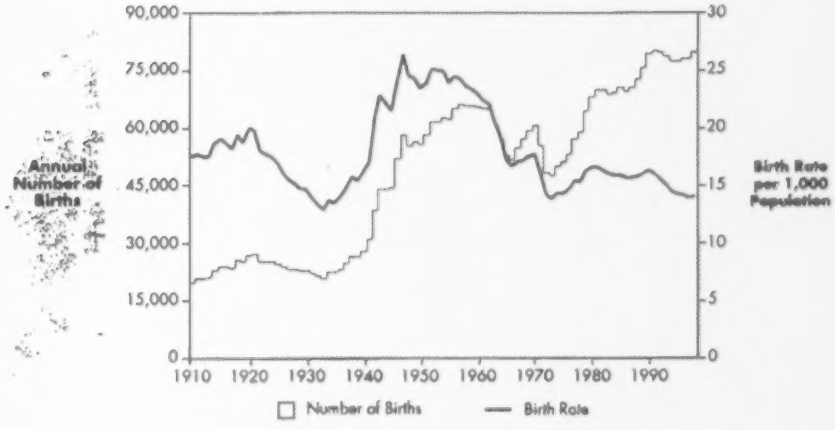
These demographic trends affect our children, not only though changes within families, but though the environment — the neighborhood, the neighbors. Recent surveys of children in the Puget Sound area suggest that children are not being well served by other adults who could play a positive role in their lives.

Raising children has never been easy. The current trends will make it even harder — politically, economically, and socially — to ensure that services, resources, and programs are adequate for the next generation of children.

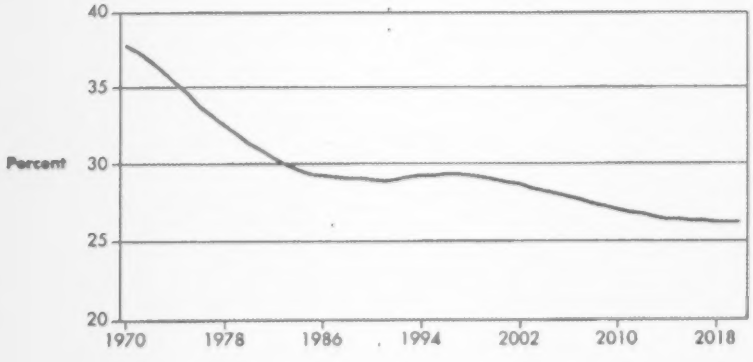
Low Birth Rate

• Although births in Washington are at near-record highs, the birth rate (per 1,000 persons) is approaching record lows. Thus, the proportion of children in Washington will decline.

Births and Birth Rates in Washington, 1910–1998



Percentage of Population Birth to 19 Years of Age



Will Support for Children's Programs Decline?

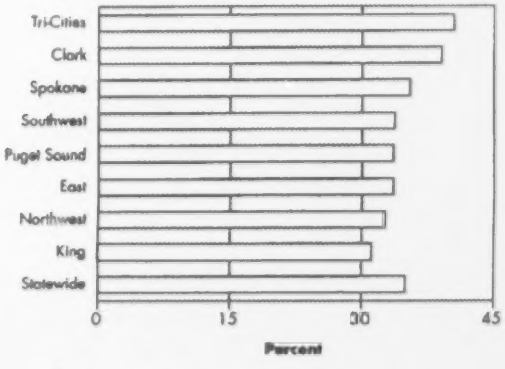
• The proportion of Washington's population from birth to 19 years of age will decline to all-time low levels early in the twenty-first century. The consequence may be a drop in political support for programs and resources for children.

Childless Households Are in the Majority

• The 1998 population survey documents that only about 1 in 3 Washington households include children.

• King County has the lowest proportion (31%) of households with children and the Tri-Cities area has the highest (41%).

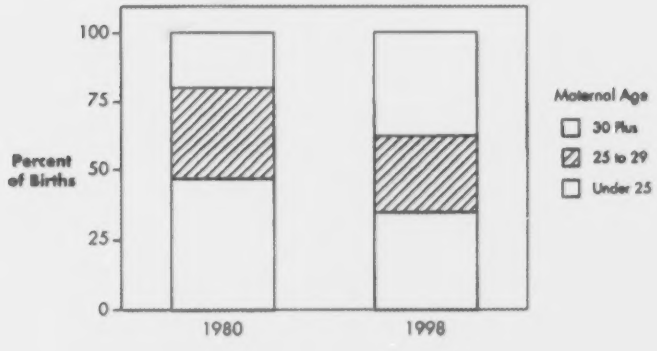
Percentage of Households with Children Under 18 Years



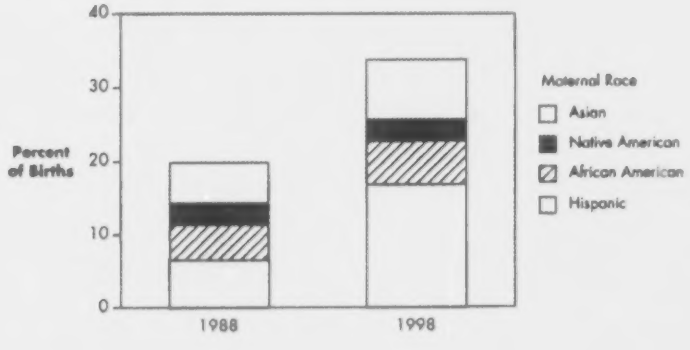
More Woman Are Having Babies Later in Life

• In the past two decades increasing numbers of women in their 30s and 40s have been having babies. Women who deliver after age 30 tend to be economically better off than are younger women.

Maternal Age and Births



Maternal Race and Births, 1988 and 1998



Birth Rates Show a Shifting Ethnic Profile

• A increasing proportion of births in Washington State are to women of color. Hispanic births represent the largest increase.

• In 1998, non-Hispanic white women accounted for 66% of deliveries, compared to 80% in 1988.

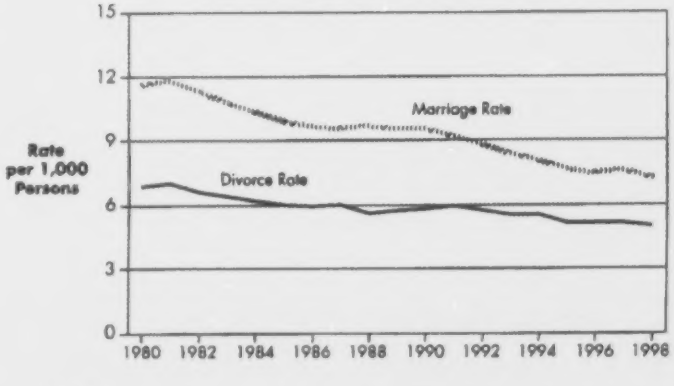
Marriage and Divorce

• Although the rate of divorce in Washington has declined slightly since 1980, the rate of marriage has declined even more, from 11.6 per 1,000 persons in 1980 to 7.3 per 1,000 in 1998.

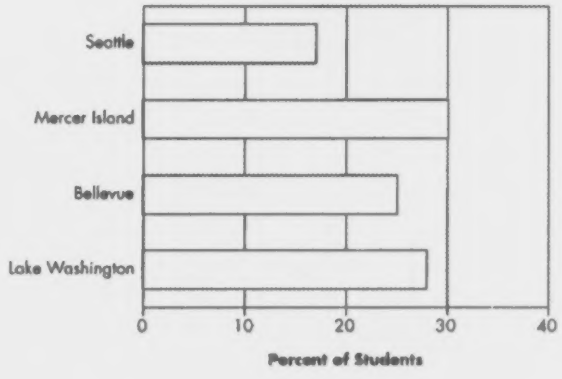
• Consequently, the ratio of the number of divorces to marriages increased from about 0.6 (60%) in the early 1980s to almost 0.7 (69%) in 1998.

• Slightly over half (52–53%) of divorces in Washington are among couples with children.

Marriage and Divorce Rates



Percentage of Students Who Feel School Provides a Caring Environment



Who Cares About Students?

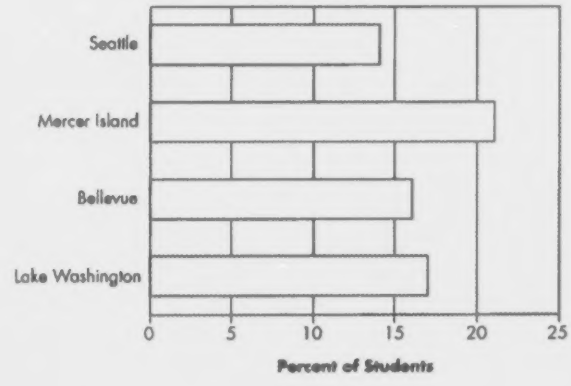
- Recent surveys of four Puget Sound school districts found that fewer than one-third of high school students in each area felt that their school provided a caring, encouraging environment.

- Only 17% of Seattle students felt their schools were caring places. Even in Mercer Island, only 30% of students rated their school as caring.

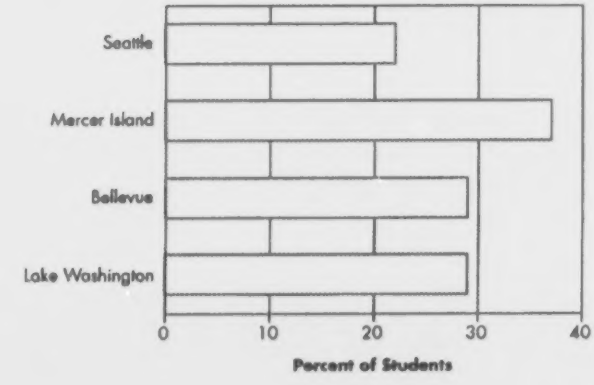
What Do Communities Value?

- In these same surveys, conducted by the Search Institute, less than one-fifth of students felt that adults in their communities valued young people. The percentage was lowest in Seattle (14%), and the highest percentage (Mercer Island) was less than 22%.

Percentage of Students Who Feel That the Community Values Youth



Percentage of Students Who Have Positive Adult Role Models



Where Are the Role Models?

- Generally, fewer than one-third of students reported that their parents or other adults in their lives modeled positive, responsible behaviors.

- Only in Mercer Island did more than a third of students say that they had positive adult role models.

WASHINGTON'S CHILDREN

ECONOMIC WELL-BEING

Washington's economy has experienced incredible prosperity for the past 10 years. Between 1996 and 1997, average wages for the state rose by more than 4% over inflation. The annual per capita personal income increased by 24% over the past decade, and between 1997 and 1998 it grew by 5%.

In 1998, most children (90%) lived in households with at least one employed adult and had health insurance coverage. Overall, the percentage of children in Washington's families living below the official poverty line has decreased slightly since 1990. More than two-thirds (70%) of families own their homes. However, our prosperity is highly unequal.

- The share of the state's total income held by the richest one-fifth of the population increased from 45% in 1990 to almost 50% by 1998. Yet, the poorest one-fifth experienced little gain during this decade of prosperity.

- Struggling families bear the hidden cost of Washington's economic success. Many adults work long hours on double jobs for a subsistence living. More than 3 of 4 children living in households with income less than the minimum required to support a family have at least one working adult. Yet, the average income in these households was a scant $8,000 with one employed adult and $17,000 with two.

- Economic prosperity did not extend to all regions in the state. While the average wages in King County grew by 6% between 1996 and 1997, the average wages in other urban areas grew by 2–3%, and in rural areas by less than 2%.

Key Indicators	Then	Now	Trend
Average Real Wages (in 1998 dollars)	$28,630 (1988)	$33,071 (1998)	Better
Per Capita Income (in 1998 dollars)	$22,600 (1988)	$28,060 (1998)	Better
Annual Childcare Cost (in 1997 dollars)	$4898 (1996)	$4987 (1997)	Higher
Childcare Cost as Percent of Take-home Wages	19.6 (1996)	19.2 (1997)	Better

- More than 255,000 businesses operate in Washington, an indicator of tremendous opportunities for entrepreneurial success. In our state, more than 1 in 4 children live in households where someone owns a business or farm, or is self-employed. Almost 45% of our wealthiest children live in households with that opportunity for advancement, but for the poorest one-fifth of children, the number drops to 1 in 8.

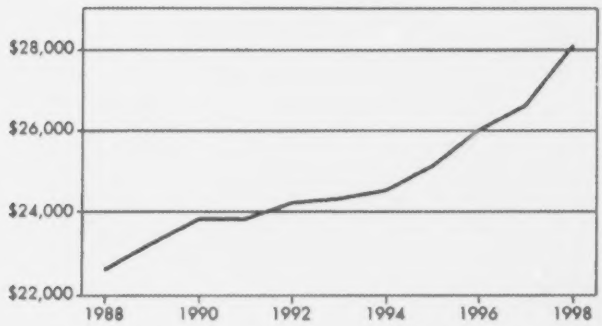
- Three-fourths of low-income households with children (ages 0–5) did not use paid childcare, though more affluent families did. In households with two or more employed adults, only 1 in 3 of these households uses paid childcare. This suggests that state assistance is inadequate to meet the childcare need of working poor families.

Employers should help families meet their budgets by providing adequate wages and healthcare and childcare benefits for their employees. And if employers are unable to do so, then local and state government agencies should help working parents meet their children's basic needs.

A Decade of Rising Incomes

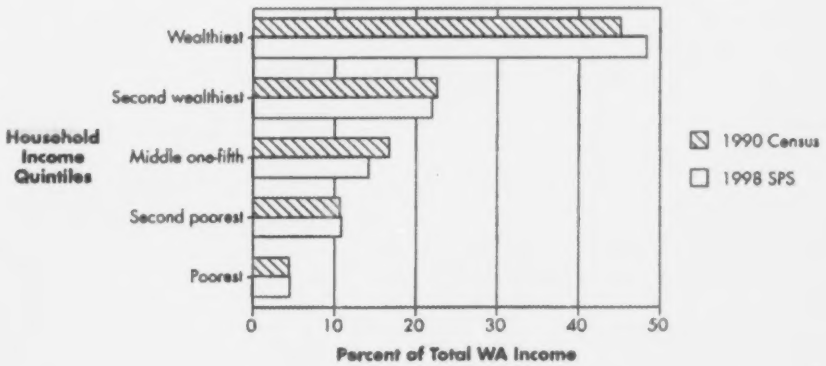
• The annual per capita personal income increased by 24% from 1988 to 1998. From 1997 to 1998, it grew by 5%, after adjustment for inflation.

Annual Per Capita Personal Income in 1998 Dollars, 1988–1998



Percentage of Washington's Total Income

Comparison of 1990 Census Data and 1998 State Population Survey Data



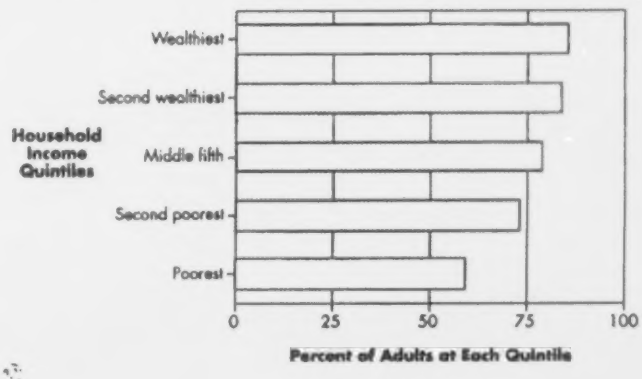
Widening Income Gap

• As personal income rose, the income gap widened between the wealthiest one-fifth and poorest one-fifth of Washington's population. The richest one-fifth held almost half of Washington's total income in 1998, an increase from 45% in 1990. The top one-fifth gained ground at the expense of every other group.

Working, but . . .

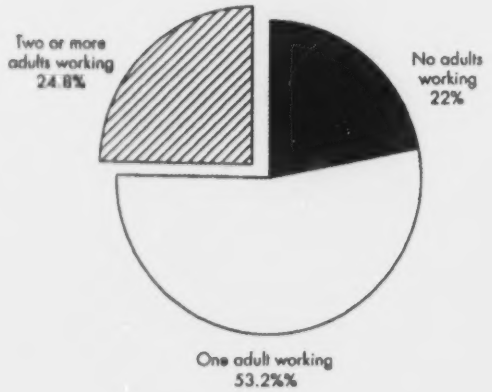
• The gap in incomes is far greater than the gap in employment. A majority (59%) of even the poorest one-fifth of Washington households have at least 1 working adult.

Percentage of Adults in Households with Children (birth to 18), Who Report Paid Work, 1998



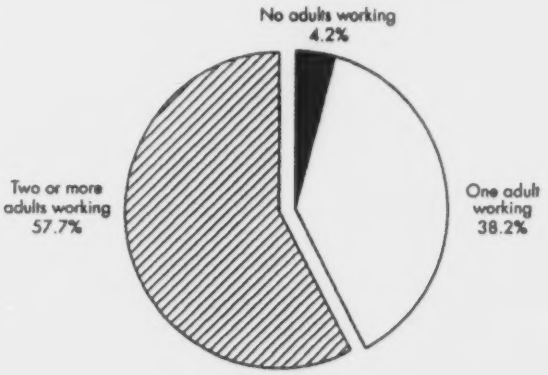
Percentage of Low-Income Children Living with Working Adults

(in households with yearly income below the minimum family budget)



Percentage of Middle- and Upper-Income Children Living with Working Adults

(in households with yearly income above the minimum family budget)



Meeting Basic Necessities

• The minimum family budget is the income needed to adequately meet the basic necessities (food, shelter, transportation, clothing, and health care). The minimum family budget is approximately twice the U.S. official poverty threshold as defined by the U.S. Bureau of the Census. For example, the minimum family budget was $22,000 for a family of 2 (1 adult and a child) in 1998 and $26,000 for a family of 3 (2 adults and a child).

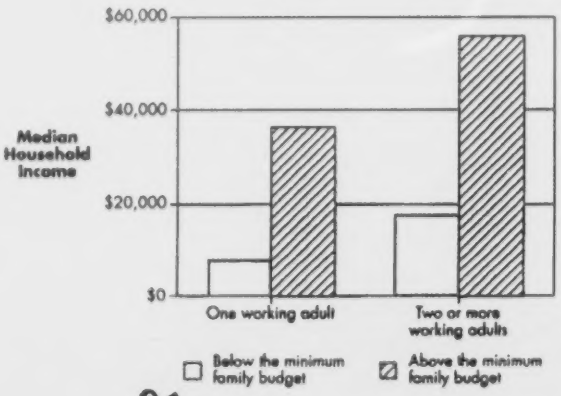
• Most children in households below and above the minimum family budget live with at least 1 working adult. However, a substantial number of children (nearly 58%) in households above the minimum family budget live with 2 employed adults, compared to 22% of the children in households below the minimum family budget.

Income Gaps

• A single parent working full time must make $12–13 per hour to meet the basic living standard for a family of 3. A minimum wage of $6.50 per hour just gets a family of 3 to the official poverty level.

• In households with 1 working adult below the minimum family budget, the median income was $8,000 per year ($4.16 per hour). This amount doubled ($17,000 per year or $8.85 per hour) for these households with 2 employed adults. However, the median income of households with children above the minimum family budget was $36,000 with 1 employed adult and $55,680 with 2 or more.

Average Income of Households with Children by Number of Adults Working



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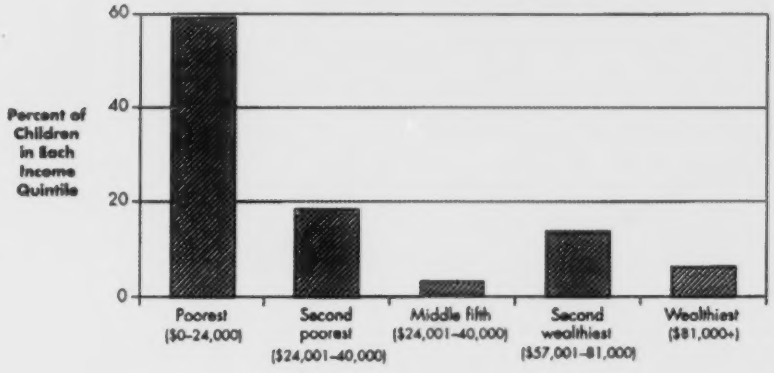
Children Living in Households Where English is Not the Primary Language

Comparison Across Income Quintiles, 1998

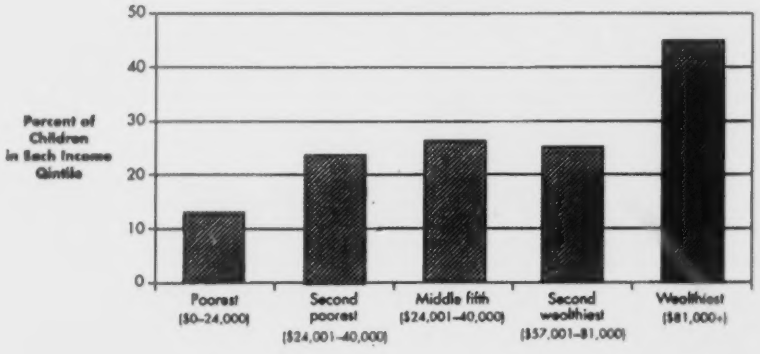


Immigrants and Poverty

• Recent immigrants are more likely than longer-term residents to have below poverty incomes. A majority (60%) of children living in households where English is not the primary language are among the poorest fifth of Washington's households.

Children Living in Households Where Someone Owns a Business, Farm, or is Self-employed

Comparison Between Household Income Quintiles, 1998



Household Business Assets and Poverty

• Only 1 in 8 of the poorest children in Washington lives in households where someone owns a business, farm, or is self-employed, compared to almost half (45%) of Washington's wealthiest households.

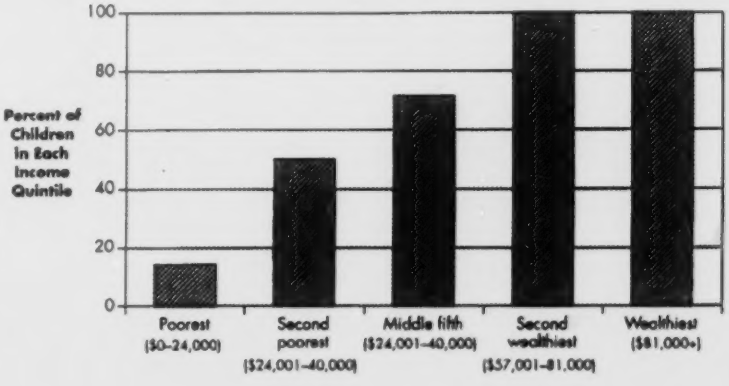
Home Ownership

• Equity in a home is the largest single source of wealth. While most of Washington's children live in their own homes, the rates of home ownership vary among each income group.

• Almost 1 of 7 of Washington's poorest children lives in households that own their own homes, compared to one-half in the second poorest income quintile, and to all children in the wealthiest households.

Children Living in Households that Own Their Home

Comparison Between Household Income Quintiles, 1998

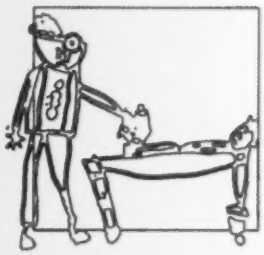


WASHINGTON'S CHILDREN

HEALTH

In many ways, we have made enormous strides in improving the health of children and families during the past century.

- Infant mortality has declined from 94 deaths per 1,000 births in 1910 to 6 per 1,000 today.
- Many acute infectious diseases have been eliminated or reduced to near-zero levels: polio, smallpox, measles, diphtheria, *Hemophilus influenzae* meningitis.



As often happens, improvements in one area uncover problems in others. In this issue of the *State of Washington's Children* we highlight three important "new" areas: disability, oral health, and tobacco.

Approximately 1 in 10 children in Washington have a physical, emotional, or learning disorder that significantly interferes with their routine activities. These conditions vary from cerebral palsy, to depression, to developmental and learning disabilities, and often involve complicated treatments from multiple service providers. They can have a profound impact on families, schools, and community services.

Key Indicators	Then	Now	Trend
Infant Mortality Rate (deaths per 1,000 live births)	5.6 (1997)	5.7 (1998)	NSC*
Low Birthweight Rate	5.6% (1997)	5.7% (1998)	NSC*
2-Year Olds Fully Immunized	80% (1997)	81% (1998)	NSC*
Deaths from Medical Conditions (deaths per 100,000)			
1 to 9-year olds	12.2	11.5	NSC*
10 to 19-year olds	9.8 (1997)	11.0 (1998)	Worse
Suicide Mortality (deaths per 100,000 10 to 19-year olds)	6.1 (1997)	5.7 (1998)	Better

*No significant change

Until recently oral heath in children has been a neglected area of concern. Recent surveys indicate that 15–40% of low-income children have acute — often urgent — unmet needs for dental treatment. Despite efforts by citizen groups, the State's Medical Assistance Administration, and many dentists throughout the state, it is clear that we are not making much progress.

Tobacco is the leading known killer of Americans. Smoking is a deadly habit that generally begins in the teen years. Four of 5 adult smokers began as teenagers. From 1990 to 1998, the prevalence of smoking increased in all grades surveyed (6th, 8th, 10th, and 12th). In 1998, 29% of high school seniors smoked, up from 21% in 1990.

Despite progress in the heath arena, many challenges lie ahead. Our approach to chronic health problems in children — physical, emotional, and behavioral — will undoubtedly require new therapies, improved systems or networks of care, and (not least of all), new resources. Dental care must be included in all efforts to expand access to health care for children.

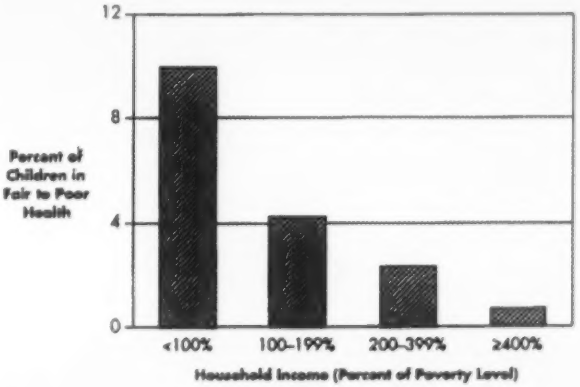
We must find new and better ways to improve health habits. Medical treatment will never be nearly as effective — or cost-effective — as prevention.

Poverty and Health

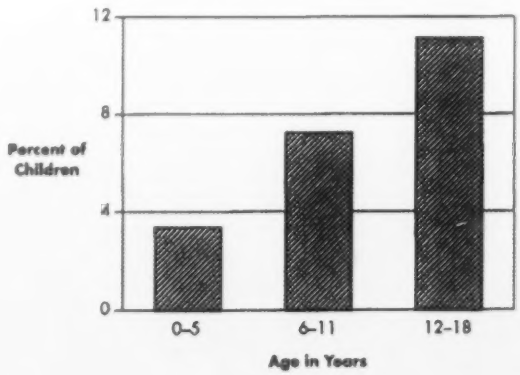
• Children in households with incomes below the poverty line are 13 times more likely to be in fair-to-poor health (as reported by a parent) than are children living in households with high incomes (>399% of poverty level).

• Although children living in households with incomes below the poverty line constitute only 11% of all children in the state, they account for 37% of all children in fair to poor health.

Health Status Is Strongly Related to Poverty



Percentage of Children with Health Conditions That Limit Physical or Learning Activities



Poor Health Limits Too Many Children

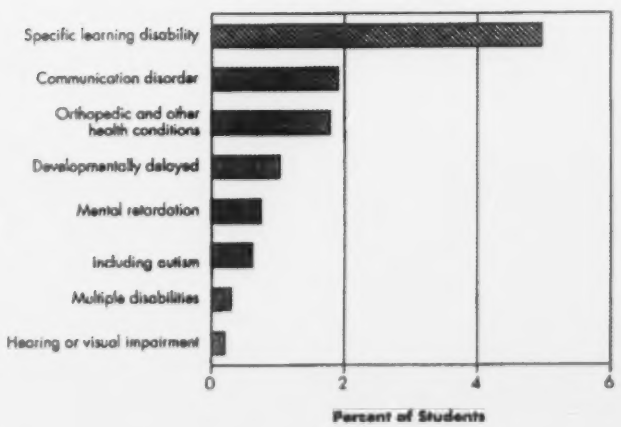
• By the teen years, 1 in 9 children have health conditions that limit their physical or learning activities.

• In grade school, approximately 1 of 14 children has a limiting health condition.

Disabilities Are Increasing

• According to an annual survey conducted in all Washington schools, almost 1 in 8 children have some form of learning, physical, sensory, or psychological disability. This percentage has been slowly increasing over the past 5 years.

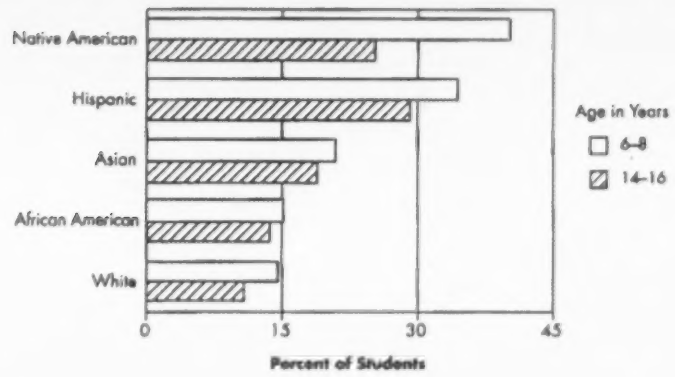
Students with Disabilities



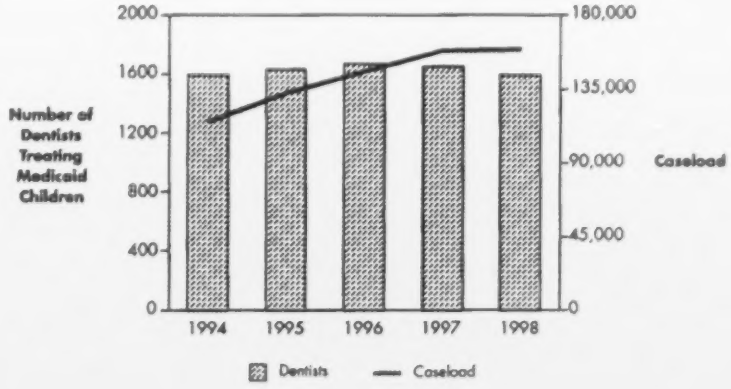
Many Poor Children Have Poor Oral Health

• A 1996 survey of low-income children found that 15–40% of 6 to 8-year olds had acute unmet needs for dental treatment. Native American and Hispanic children had the highest unmet needs.

Students Needing Dental Treatment



Growth in Caseload of Children with Dental Medicaid Exceeds Growth in Number of Dentists Treating Medicaid Patients



Efforts to Meet the Need

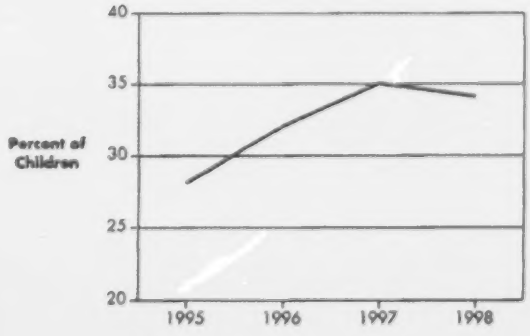
• Although Medicaid increased its reimbursement rates in 1995 to encourage more dentists to participate in the program, the number of dentists seeing Medicaid clients has not increased.

• The major change is that dentists previously seeing Medicaid patients increased their caseloads. In addition, federally qualified health centers have expanded their dental services to meet this very large need.

Only One-third of Children in Medicaid Receive Dental Care

• Since 1995, the percentage of children in Medicaid who are seeing a dentist has increased slightly. Nevertheless, only about one-third of such children are receiving services.

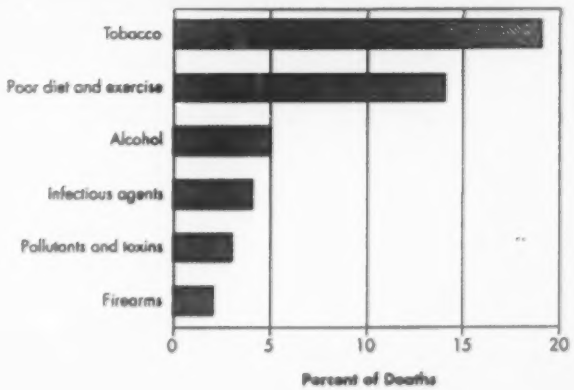
Percentage of Medicaid-Covered Children (Under Age 18) Who Received Dental Services



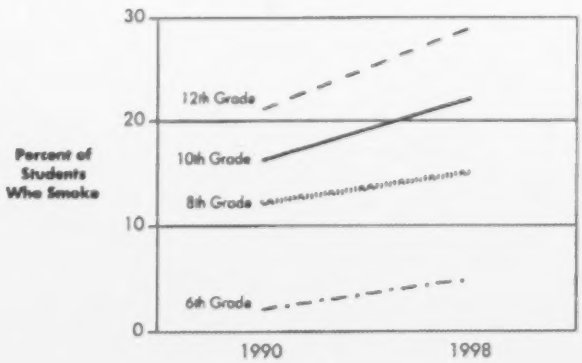
Tobacco Tops the List

- Recent analyses have helped clarify the impact of preventable causes on overall mortality in the United States.
- Tobacco, especially cigarettes, was the leading preventable cause of death, responsible for 19% of all deaths.
- Every day 65 children will start smoking; 22 of them will die prematurely because of their smoking.

Leading Causes of Preventable Death



More Children Are Smoking



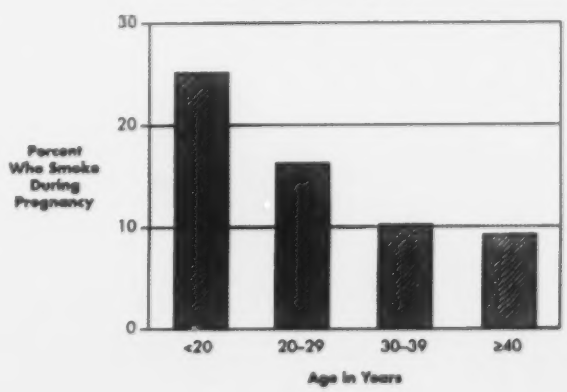
Tobacco, a Drug by Any Other Name . . .

- The proportion of children who smoke increased in Washington schools from 1990 to 1998 in all grades surveyed.
- Most of these students will continue to smoke into adulthood.

Harmful to Mother AND Child

- Maternal smoking is known to be bad for the growing fetus and for the infant.
- Women under age 20 are far more likely to smoke during pregnancy than are older women.

Among Pregnant Woman, Teens Have the Highest Percentage of Smokers



Washington's Children

EDUCATION

The importance of natural resources to Washington's future rises and falls over time, but children remain our most important source of capital and productivity. The knowledge and skills of our children will determine whether they succeed individually, and whether society fares well or poorly in the future.

Education is the key to a good job and a promising future. Upgrading skills through excellent education is one of the most important ways that Washington can compete in the global economy of the twenty-first century. To meet this goal, in 1997 the state instituted an accountability structure, with clear learning goals and an appropriate way of measuring progress — the Washington Assessment Student Learning tests that hold schools and districts accountable for positive results. Now, after three years of these tests in the fourth and seventh grades, we are happy to report that student performance appears to be improving.

To meet our standards of excellence, we need not just a good test, but good teachers. To merely maintain our current student/teacher ratio of 19 to 1, we will need to hire an additional 2,551 teachers by 2004. To improve our poor ratio (the third worst in the nation), we would have to train, recruit, and support thousands more.

We can be pleased that test scores have improved for the past three years. However, performance on these new tests remains well below our goals.

Key Indicators	Then	Now	Change
Percentage of 4th Graders Meeting Adequate Standards on WA Student Learning Tests			
Math	34	42	Better
Writing	41	37	Worse
Reading	61	67	Better
Listening	75	77	Better
	(1998)	(1999)	
Percentage of 7th Graders Meeting Adequate Standards on WA Student Learning Tests			
Math	22	28	Better
Writing	34	42	Better
Reading	42	46	Better
Listening	83	91	Better
	(1998)	(1999)	
WA Public School Enrollment	**Then**	**Projected**	**Change**
K–8	691,287	721,069	+ 4.3%
Grades 9–12	303,362	324,111	+ 6.8%
Total	994,649	1,045,180	+ 5.1%
	(1998)	(2004)	

□ With our economy increasingly relying on technology, math has become one of the most important skills for future workers. Math continues to be a challenge for our students, especially for seventh graders. Although 2 of 5 fourth graders meet adequate standards, only 1 of 7 fourth graders and 1 in 10 seventh graders displayed excellence on the math test in 1999.

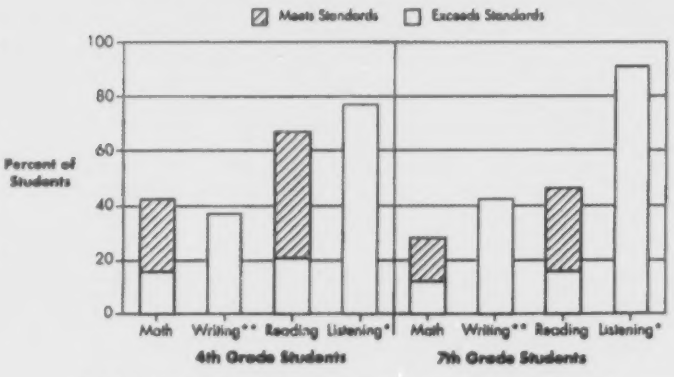
□ We continue to fall short of meeting the needs of minority students. While 2 of 7 white and Asian seventh graders meet adequate standards on the math test, only 1 of 14 African American, 1 of 13 Hispanic, and 1 of 11 Native American students meet adequate standards on the math test.

Many factors influence student performance, including parent education, family income, home and community environments, school environment, and student motivation and ability. In addition to holding our schools accountable, we as parents and community members must step forward and assume our responsibility to help all of our children achieve.

Problems with Math

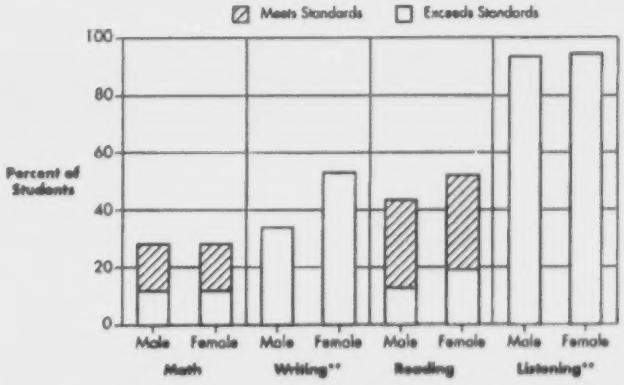
- About 1 in 2 fourth grade students and 1 in 3 seventh grade students meet standards on the Washington Assessment of Student Learning math test.
- About 1 in 6 fourth graders *exceed* the adequate standards in math; the number of students achieving excellence on the math test decreases to 1 in 8 by seventh grade.
- Most fourth graders (8 in 10) and seventh graders (9 in 10) do well on the listening test.

Percentage of 4th and 7th Grade Students Meeting Standards on the 1999 WASL Math, Writing, Reading, and Listening Subtests



*Excludes students receiving Special Education, Section 504, and/or Bilingual/ESL Education services.
**On the writing and listening test there are only two standards: meeting standards and not meeting standards.

Percentage of Male and Female 7th Grade Students* Meeting Standards on the 1999 WASL Math, Writing, Reading, and Listening Subtests



*Excludes students receiving Special Education, Section 504, and/or Bilingual/ESL Education services.
**The writing and listening test have only two standards: meeting standards and not meeting standards.

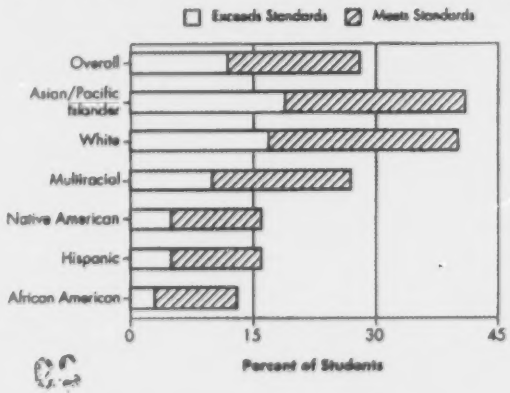
Boys and Girls Are Equal on Math and Listening Tests

- The same percentage of male and female seventh graders meet adequate standards on the mathematics and listening tests. However, the percentage of seventh graders meeting standards on the reading and writing tests is relatively higher for girls than boys.

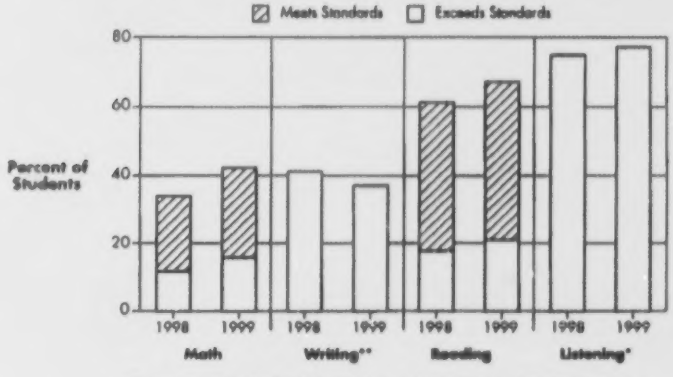
Ethnic Groups Show Wide Variations on Math Standards

- While 1 in 6 white seventh graders and 1 in 5 Asian/Pacific Islanders *exceed* math standards, only 1 in 20 Hispanics and Native American students, and 1 in 33 African American students exceed math standards.

Percentage of 7th Grade Students Meeting or Exceeding Standards on the 1999 WASL Math Subtest by Race/Ethnicity



Percentage of 4th Grade Students* Meeting or Exceeding Standards on the 1998 and 1999 WASL Math, Writing, Reading, and Listening Subtests

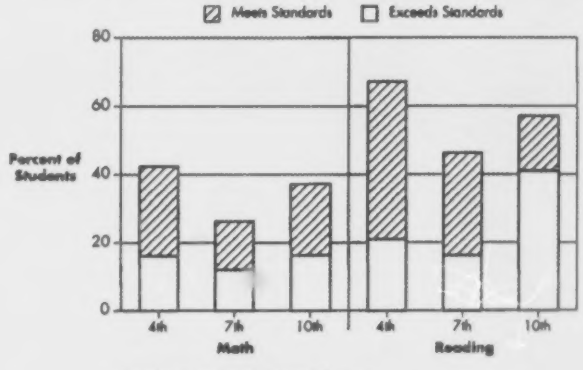


*Excludes students receiving Special Education, Section 504, and/or Bilingual/ESL Education services.
**The Writing and Listening tests have only two standards: meeting standards and not meeting standards.

Doing Better in Math

• Eight percent more fourth graders met math standards in 1999 than in 1998. The percentage of fourth graders exceeding math standards also increased. One in 8 fourth graders exceeded math standards in 1998, compared to 1 in 6 in 1999.

Percentage of 4th, 7th, and 10th Grade Students* Meeting or Exceeding Standards on the 1999 WASL Math and Reading Subtests



*Excludes students receiving Special Education, Section 504, and/or Bilingual/ESL Education services.

Math Is a Continuing Challenge

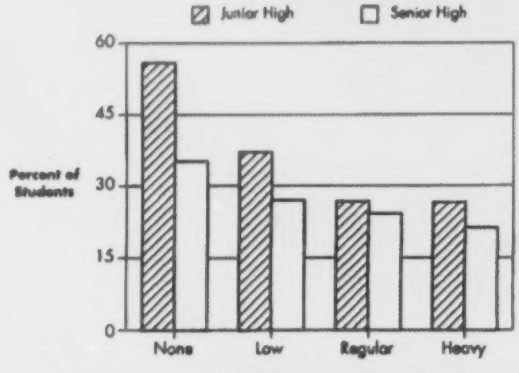
• In comparison with fourth and tenth graders, seventh graders are trailing behind on their math scores. About 1 in 4 seventh graders meets adequate standards while almost 1 in 2 fourth graders and 1 in 3 tenth graders meet adequate standards on the math tests. Similarly, 1 in 6 seventh graders achieve excellence in reading while almost 1 in 5 fourth graders and 1 in 2 tenth graders perform exceptionally well in reading.

Drugs Affect Motivation

• Students who do not use drugs seem to be more motivated in school; more than half of the junior high students who do not use drugs believe that school is meaningful as opposed to a little more than 1 in 4 junior high students who are heavy drug users.

• The percentage of students who believe that school is meaningful declines for all students between junior high and high school; however, the percentage of students who believe that school is meaningful is still higher among students who do not use drugs.

Percentage of Students Who Think School Is Meaningful* by Level of Substance Use

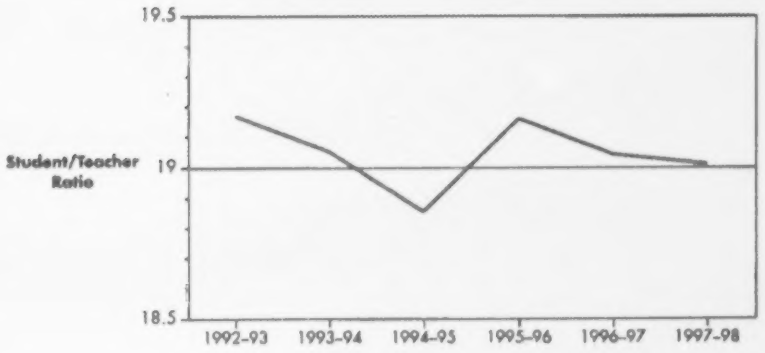


*Respondents selected "almost always" or "often" to the question "School work is meaningful and important."

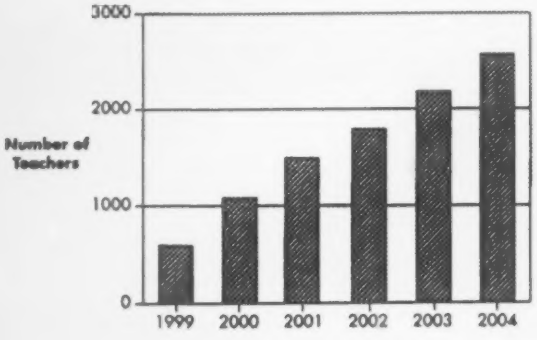
Third Worst Ratio in the Nation

• Washington's student-teacher ratio remains high (19 to 1) relative to the national average (17.3 to 1) and is the third highest in the United States.

Washington State Public K-12 Student/Teacher Ratio, 1992–98
Average Annual Enrollment/Certified Instructional Teachers



Cumulative Number of Additional Teachers Needed to Keep Up with Increasing K-12 Enrollments, 1999–2004



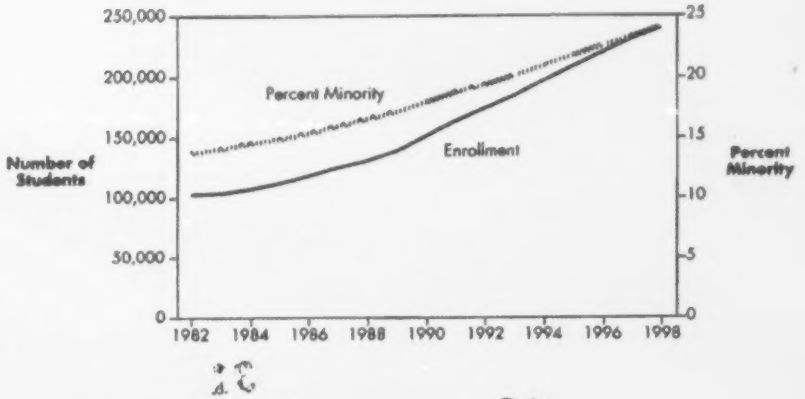
Washington State Faces a Huge Challenge

• Between growing school enrollments and the impending retirement of the baby boom generation of teachers, Washington will face a huge challenge in recruiting and retaining quality teachers. We will have to recruit 2,500 additional teachers by 2004 just to maintain current class size.

Steadily Increasing Minority Enrollment

• Minority enrollment in public schools has increased by 45% over the past decade compared with the 15% increase in enrollment in 1998. Almost 1 of 4 students (23%) enrolled in public school in 1998 was a student of color.

Washington State Public K-12 Minority Enrollment Trends, 1982–1998

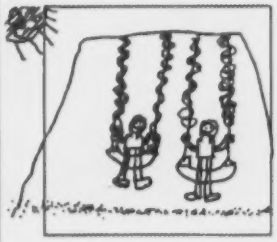


WASHINGTON'S CHILDREN

SAFETY AND SECURITY

At the dawn of the new century, children face three major external threats to safety: cars, firearms, and adults.

The automobile is the leading killer of youth. Death by firearms is the second.



□ Although deaths of children from motor vehicles accidents have declined in the past two decades, in 1998 motor vehicle-related injuries still accounted for 25% of deaths of children between 1 and 19 years of age and 37% of deaths of children between the ages of 15 and 19. The number of 15 to 19-year old drivers and passengers who die in vehicular accidents is higher than all the other motor-vehicle-related fatalities in children combined, including deaths of pedestrians and bicyclists.

□ Although the recent increase in firearm deaths has begun to level off, in 1998 firearms were still involved in 1 in 5 deaths of children aged 15 to 19 years. Most of these firearm-related deaths were suicides.

A significant reduction of mortality — and in injury, medical care, and disability — due to cars and firearms is an achievable goal for Washington. We can make guns, cars, and highways safer, and we can try to restrict access of minors to guns and cars.

Unlike guns and cars, adults rarely kill children. But through abuse and neglect, too many adults set in motion life-long dynamics that limit or destroy children's capacity for growth, success, and happiness.

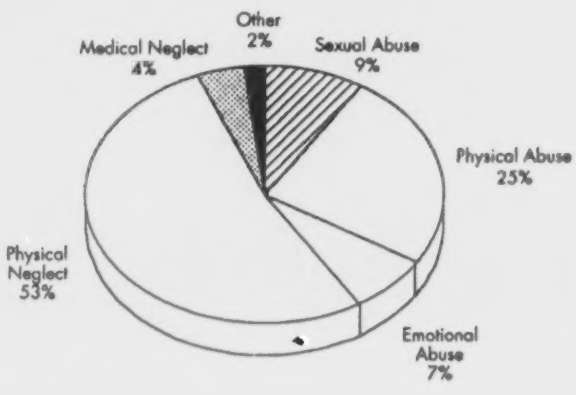
In FY 1999, Child Protective Services in Washington received referrals for over 42,000 cases of child abuse. This figure, which is widely believed to underestimate the scope of the problem, represents almost 3% of children under 18 years of age.

Key Indicators	Then	Now	Trend
Child Abuse and Neglect Accepted Referrals (per 1,000 children <17 years)	30 (1998)	28 (1999)	Better
Deaths from Unintentional Injuries (per 100,000)			
Children 0 to 14	9.9	7.2	Better
Children 15 to 19	34.7 (1997)	31.1 (1998)	Better
Deaths Due to Homicide (per 100,000 15 to 19-year olds)	8.8 (1997)	8.2 (1998)	NSC*
Deaths Due to Firearms 15 to 19-year olds			
per 100,000	17	12.7	Better
percent of deaths	24.9 (1997)	20.4 (1998)	Better
Juvenile Arrest Rates for Violent Crime (per 100 10 to 19-year olds)	3.2 (1994)	3.3 (1995)	No Change
Juveniles Held in Detention (per 1,000 10 to 17-year olds)	1,015 (1996)	1,023 (1998)	No Change

*No significant change

Understanding the causes of child abuse and neglect and developing effective prevention and treatment programs will be our greatest challenges of the new century. It will demand the full measure of our collective ideas, efforts, and caring.

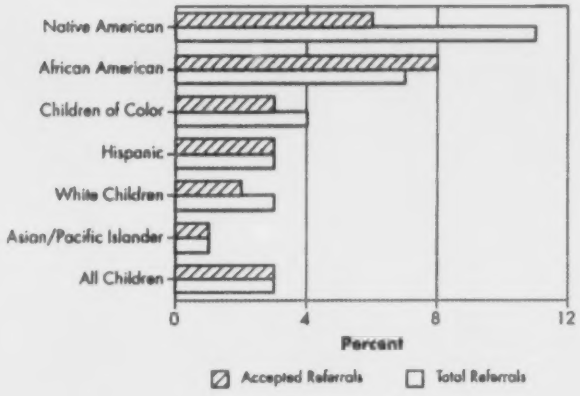
Type of Report to Child Protective Services 1998



Physical Neglect Tops the CPS Caseload List

• Physical neglect accounts for most referrals to Washington's Child Protective Services, although many accepted referrals are for physical or sexual abuse. Many referred cases involve more than one type of problem.

Children Referred to and Accepted by Child Protective Services (CPS) for Suspected Abuse or Neglect, by Rates per Child Population



Assessing Referrals

• One-third of children referred to CPS for abuse or neglect are screened out and not accepted for further investigation.

• Rates for accepted children are higher for preschool (birth to 5) and school children (ages 6–12), and drop by half in the adolescent years (ages 13–17).

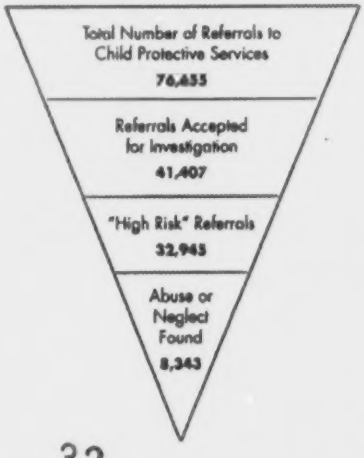
Investigating Child Abuse

• Of the 76,655 referrals made to Child Protective Services in 1998, 41,407 referrals had an identifiable potential "victim" and were considered serious enough to accept for investigation.

• The Department of Child and Family Services investigated 32,945 "high risk" referrals in 1998.

• Child abuse or neglect was found immediately in 8,343 situations (physical neglect 49%, physical abuse 33%, sexual abuse or exploitation 10%, medical or prenatal neglect 5%, and emotional abuse 3%).

• Abuse or neglect was not found in 15,961 situations. For many other children, abuse or neglect may be substantiated after a second or third referral



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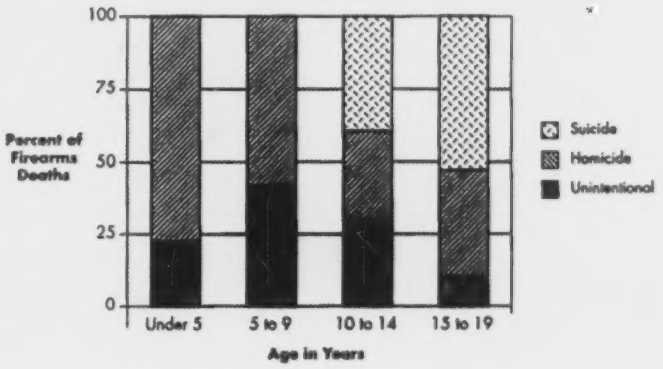
From Homicide to Suicide

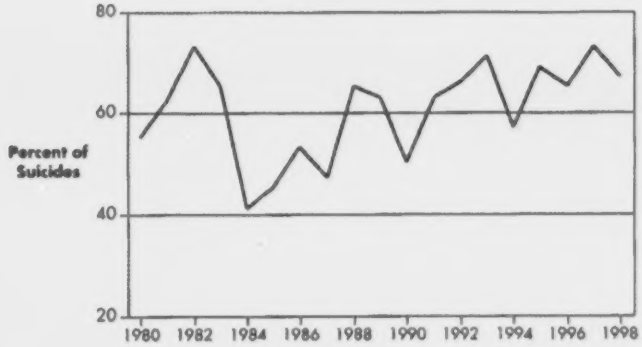
• Below age 10, most deaths due to firearms are homicides, although unintentional (accidental) deaths are not uncommon.

• Among adolescents, most firearms deaths are suicides.

Firearms: Cause of Death Varies by Age



Percentage of Suicides Due to Firearms (Age <20 Years)



East Access, Disturbing Deaths

• Most child suicides are by firearm.

• The proportion (and number) of suicide deaths due to firearms has been increasing over the past 15 years.

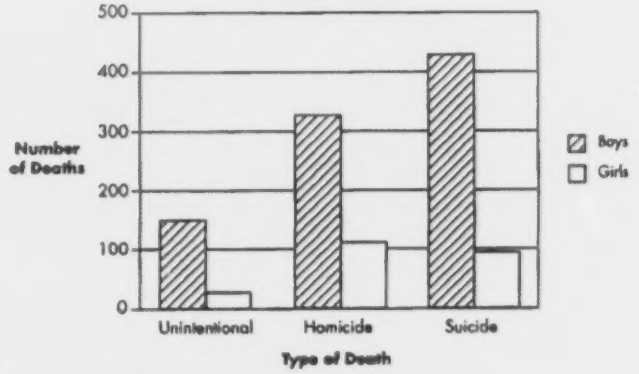
• In 1997–98, 7 of 10 youth suicides were due to firearms.

Boys and Guns: Fatal Attraction

• Previous studies reported in *The State of Washington's Children* indicate that boys are 50% more likely to say that it is "easy" to obtain a gun. This graph suggests that boys find it easier than girls to die by guns.

• Compared to girls, boys are almost six times more likely to die from gun accidents, three times more likely to die of firearm-related homicides, and four times more likely to die from suicide by firearm.

Guns as a Cause of Death, 1980–1998 (Age <20 Years)



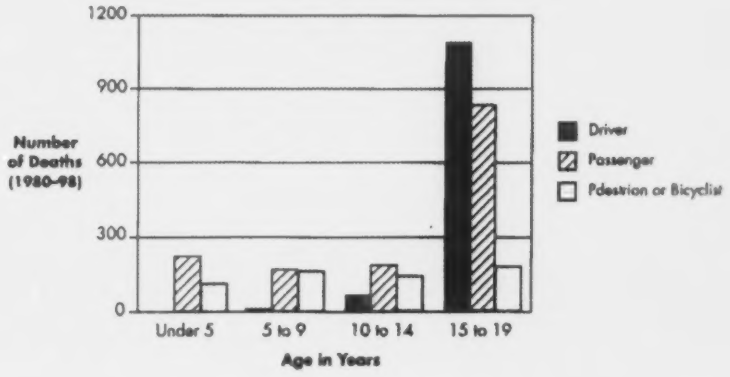
AUTOMOBILES: THE KILLERS OF TEENS

Teens and Cars

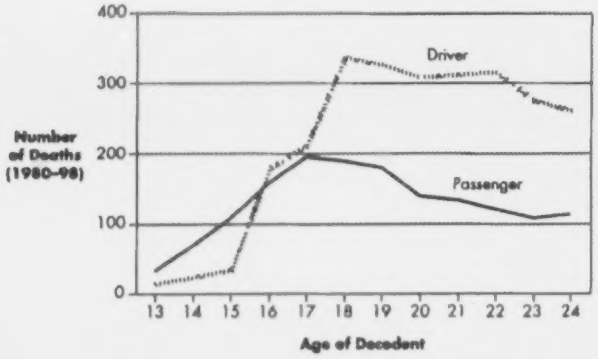
- Each year in Washington State, approximately 130 children under age 20 are killed in motor vehicle accidents — the largest single killer of children.

- While pedestrian deaths occur equally at all ages, driver and passenger deaths increase dramatically in the later teen years, far exceeding all other types of MVA-related deaths.

Motor Vehicle Accidents (MVA): A (Last) Rite of Passage



Motor Vehicle Accident (MVA) Deaths Peak in Years When Teens Are Learning to Drive



New Drivers at Risk

- The highest number of MVA deaths for both passengers and drivers occurs in the late teen years, when children are just beginning to drive.

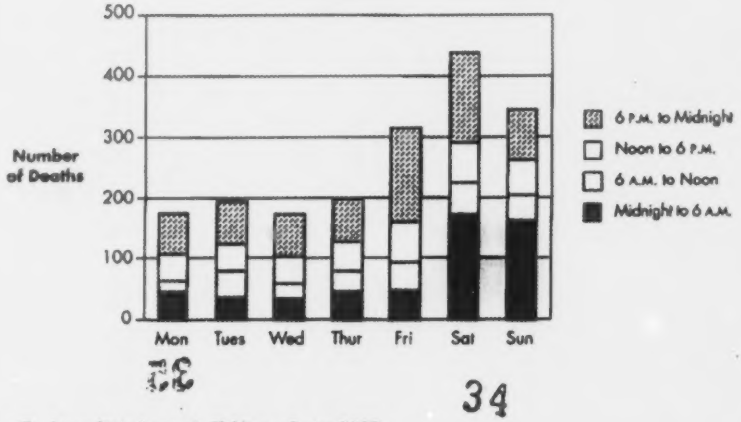
- If number of deaths per driver or per mile could be plotted, the peaks likely would occur earlier (at age 16) and would be even more pronounced.

Danger in the Night

- Weekend nights are clearly dangerous times for teen drivers and passengers.

- The most hazardous 32 hours of the week are from 6 P.M. to midnight Fridays and Saturdays, and midnight to 6 A.M. Saturdays and Sundays, when more than one-third of all fatalities occur.

When Do Motor Vehicle Fatalities Occur?
15 to 19-Year-Old Drivers and Passengers
1980–1998



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SOURCES

Family and Community

Key Indicators (page 13)
Teen Births, Divorces, and Births to Unmarried Women: Washington State Department of Health (DOH), Center for Health Statistics (CHS)
Children in Out-of-Home Care: Washington State Department of Social and Health Services (DSHS), Children's Administration

Graphs

Page 14:
- Births and Birth Rates: Office of Fiscal Management
- Population, Birth to 19 Years: Office of Fiscal Management
- Households with Children <18: 1998 Washington State Population Survey (SPS)

Page 15: DOH CHS, Vital Registration System Annual Statistical Files, August 1999
Page 16: Seattle Times, March 3, 2000, page B2.

Economic Well-Being

Key Indicators (page 17)
Average Wages: Washington State Employment Security
Per Capita Income: 1997 Data Book from the Office of Fiscal Management
Annual Child Care Cost, and as Percentage of Take Home Wages: Child Care Research and Analysis, DSHS

Graphs
Page 18:
- Per Capita Income: 1997 Data Book from the Office of Fiscal Management
- Percent of Washington's Total Income: 1990 U.S. Census and 1998 SPS

Pages 18 (3rd graph), 19–20: 1998 SPS

Health

Key Indicators (page 21)
Infant Mortality, Low Birthweight, Deaths from Medical Conditons, and Suicide Mortality: DOH CHS
Immunization: DOH Immunization Branch

Graphs
Page 22:
- Health Status and Poverty: 1998 SPS
- Limiting Health Conditions: 1998 SPS
- Students with Disabilities: Office of Superintendent of Public Instruction

Page 23:
- Students Needing Dental Treatment: DOH, Washington State Smile Survey, February 1996.
- Dental Medicaid Caseload: U.S. Medical Assistance Administration (MAA)
- Medicaid Coverage and Dental Services: MAA

Page 24: DOH Web Page: http://www.doh.wa.gov/Tobacco/gofig.htm

Continued on next page

Education

Key Indicators (page 25)
Student Learning Tests: Washington Assessment of Student Learning (WASL), Office of Superintendent of Public Instruction (OSPI)
Washington State Public Enrollments: OPSI

Graphs
Pages 26–27: Washington Assessment of Student Learning, OPSI
Page 27 (3rd graph): Washington State Survey of Adolescent Health Behaviors (1998)
Page 28:
K-12 Student/Teacher Ratio: Data Warehouse from OPSI
Number of Additional Teachers: Data Warehouse from OPSI
Minority Enrollment Trends: Data Warehouse from OPSI

Safety and Security

Key Indicators (page 29)
Child Abuse: DSHS, Child Protective Services
All Mortality Indicators: DOH CHS
Juvenile Arrest Rates: Governor's Juvenile Justice Advisory Committee, 1998 Juvenile Justice Report

Graphs
Page 30: 1998 Child Abuse and Neglect Data, DSHS Children's Administration
Pages 31–32: DOH CHS

Appendix

Page 35: Office of Financial Management
Page 36: Office of Financial Management

APPENDIX

Washington's Children 1980 and 1998
(Children Birth to 17 Years of Age)

County	1980 (Census)	1998 Change (Estimate)	Change	Percent Change
Adams	4,625	5,494	869	19
Asotin	4,908	5,597	689	14
Benton	34,276	41,680	7,404	22
Chelan	11,629	17,861	6,232	54
Clallam	13,966	15,677	1,711	12
Clark	60,572	94,513	33,941	56
Columbia	1,092	1,045	(47)	-4
Cowlitz	23,974	25,253	1,279	5
Douglas	6,672	8,683	2,011	30
Ferry	1,957	2,157	200	10
Franklin	11,654	15,462	3,808	33
Garfield	677	645	(32)	-5
Grant	15,806	21,561	5,755	36
Grays Harbor	18,968	18,537	(431)	-2
Island	12,315	18,648	6,333	51
Jefferson	3,978	6,091	2,113	53
King	311,476	404,472	92,996	30
Kitsap	42,290	65,023	22,733	54
Kittitas	5,773	7,169	1,396	24
Klickitat	4,842	5,400	558	12
Lewis	16,880	19,507	2,627	16
Lincoln	2,658	2,631	(27)	-1
Mason	8,404	12,453	4,049	48
Okanogan	9,301	11,215	1,914	21
Pacific	4,409	5,017	608	14
Pend Oreille	2,773	3,197	424	15
Pierce	137,323	189,792	52,469	38
San Juan	1,709	2,775	1,066	62
Skagit	17,569	26,459	8,890	51
Skamania	2,469	2,852	383	16
Snohomish	99,940	161,367	61,427	61
Spokane	95,733	109,635	13,902	15
Stevens	9,931	11,285	1,354	14
Thurston	36,727	53,757	17,030	46
Wahkiakum	1,182	968	(214)	-18
Walla Walla	11,885	13,879	1,994	17
Whatcom	28,349	41,800	13,451	47
Whitman	7,540	8,112	572	8
Yakima	53,128	65,506	12,378	23

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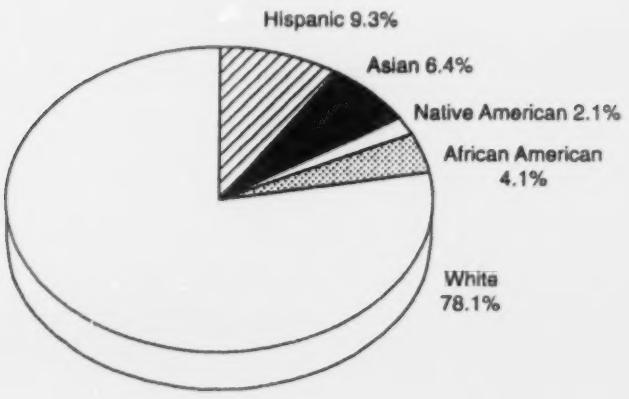
Washington's Children, Birth to 19 Years, 1998



Washington's Children, 1998

Age	All	White	Black	Indian	Asian	Hispanic
Birth to 4	401,505	316,782	14,286	7,584	20,148	42,706
5–9	449,492	352,221	19,477	9,606	26,218	41,970
10–14	425,663	330,934	18,028	9,277	30,928	36,495
15–19	402,019	309,875	17,639	8,737	30,849	34,919
Total (birth to 19)	1,678,679	1,309,811	69,431	35,204	108,143	156,090

Age	Male	Female	Total
Birth to 4	205,498	196,007	401,505
5–9	230,418	219,074	449,492
10–14	218,483	207,180	425,663
15–17	126,623	119,891	246,514
18–19	80,235	75,270	155,505
Totals			
Birth to 17	781,022	742,152	1,523,174
Birth to 19	861,257	817,422	1,678,679

WASHINGTON KIDS COUNT

This is the eighth annual report on *The State of Washington's Children*. It was produced by the University of Washington School of Public Health and Community Medicine in collaboration with the Institute for Public Policy and Management of the Graduate School of Public Affairs. This report is part of the Washington Kids County project, which monitors the conditions of children and families in Washington, educates the public and policymakers about those conditions, and urges public action on behalf of improved outcomes.

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The Washington Kids Count Project receives major funding from the Annie E. Casey Foundation, the Washington Division of Alcohol and Substance Abuse of the Department of Social and Health Services, and The Boeing Company.

Questions about the Family and Community, Health, or Safety and Security Sections should be directed to Fred Connell, 543-8887. For questions about the Economic Well-being and Education sections contact Richard Brandon, 543-8483. For further information about this or other Washington Kids Count reports, call us at 206-685-7613. The reports are available online at <http://hspc.org>. (All UW numbers use area code 206.)

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